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Law Office-Dir Suite 330 5350 Shawnee R	I h Ste ade tra	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
Alexandria, VA		THE THE PERSON NAMED IN					(Depositor's name)	
		& THYDER					(Signature)	
			L				(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.			
10/624,519	10/624.519 07/23/2003		Sanjay Kotha		US 1330/02		7440	
	: MAGNETIC FLUID C	USHIONING DEVICE F	FOR A FOOTWEAR OR	SHOE				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
	YES	\$700	\$0	\$0		\$700	04/19/2007	
nonprovisional			CLASS-SUBCLASS	٦ .			. *	
EXAMINER		ART UNIT	036-029000	J				
	N, MARIE D	3728		natent front nage li	st			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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3. ASSIGNEE NAME A	AND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or t	ype)				
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR 20 JUNITARY 199919011 1							24519	
MATERIALS M	ODIFICATION	FAIRFAX,	VIRGINIA	vi	•	700.00 UP		
Please check the appropriate assignce category or categories (will not be printed on the patent):								
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.								
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a Applicant clair	atus (from status indicate ns SMALL ENTITY state	is Soc 37 CFR 1-27	☐ b. Applicant is no le	onger claiming SMA	LL ENT	ITY status. See 37 CF	R 1.27(g)(2).	
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